

CLAIMS ONLY

Application Number:

"Filing" Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total						
Indep	4					
Total	37					
Depend						
Total	41					
Claims						

AS FILED

8/31/96

* May be used for additional claims or amendments

	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
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